PS Form 3811, February 2004 Domestic R	eturn Receipt 102595-02-M-1540
2. Article number (Transfer from service label)	1408 8378 #138 D-077 01-210
Cincinnati, OH 45206	3. Service Type  Certifled Mail
Darlington Amadasu PO Box 6263	
Article Addressed to:	D. is delivery address different from item 1?  Yes  If YES, enter delivery address below:  No
<ul> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	B. Received by (Printed Name) C. Date of Delivery
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse</li> </ul>	A. Signature  Agent  Addressee
SENDER: COMPLETE/THIS SECTIOND-TSB	COMPLETE THIS SECTION ON DELIVERY 3/02/200